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STROOCK & 180 MAIDEN L NEW YORK, N	· · · · ·	VAN, LLP	I he Stat addı tran	reby certify that the es Postal Service we ressed to the Mail	is Fee(s vith suff Stop I	of Mailing or Trans) Transmittal is being licient postage for firs (SSUE FEE address) 273-2885, on the d	g deposited with the United at class mail in an envelope above, or being facsimile	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO		CONFIRMATION NO.	
10/539,658	07/11/2005		Robert Frigg	Frigg		32-1183-9999;	4693	
OF INVENTION						(001227/0 215		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$ 0		\$1700	08/09/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
PRIDDY, MICHAEL B 3733			623-017160					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternativ (2) the name of a single registered attorney or a	rinting on the patent front page, list names of up to 3 registered patent attorneys is OR, alternatively, name of a single firm (having as a member a ed attorney or agent) and the names of up to ored patent attorneys or agents. If no name is on name will be printed. 1 Stroock & Stroock & Lavan LLF 2 3				
. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON 1	THE PATENT (print or typ	e)	····			
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identi	fied below, no assignee	data will appear on the pa	tent. If an assigne	e is ide	entified below, the do	cument has been filed for	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
ASynthes (U.	S.A.)	West Chester, Pennsylvania						
Please check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 💆 Cor	poratio	n or other private grou	up entity Government	
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a. Applicant claims	SMALL ENTITY status	s. See 37 CFR 1.27.	b. Applicant is no long	er claiming SMAL	L ENTI	TY status. See 37 CF	R 1.27(g)(2).	
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